2/00 INJERNAL TRANSFER	REQUEST FOR S.N.	09/865,163
DATE: 4/11/07	FROM: R. FRED	(print name)
FORWARD TO: A. Art Unit: 2173 B. Class: 345 C Subclass: 763	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
^	DED: EMULATION AS IN 703. SPECIFYING VALUES	•
DATE: 23 Apr 02	FROM: Rayer	
FORWARD TO: A. Art Unit: B. Class: C Subclass: 156 +	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box) (check box)
Details of pl		ice configuration
DATE:	FROM:	(print name)
FORWARD TO CLASSIFIER	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
FURTHER EXPLANATION IF NEED	ED:	
DISPOSITION BY 2700 CLAS	SIFICATION	
DATE:	CLASSIFIER:	
FORWARD TO: A. Art Unit: B. Class:	REASON(S): A. You had Parent B. See Title C. See Abstract	(check box) (check box)
C Subclass:	D. See Claim(s):	(check box)

FURTHER EXPLANATION IF NEEDED: